Tunica Vasculosa Lentis as an Independent Risk Factor for Treatment in Retinopathy of Prematurity

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Relevant Financial Disclosures

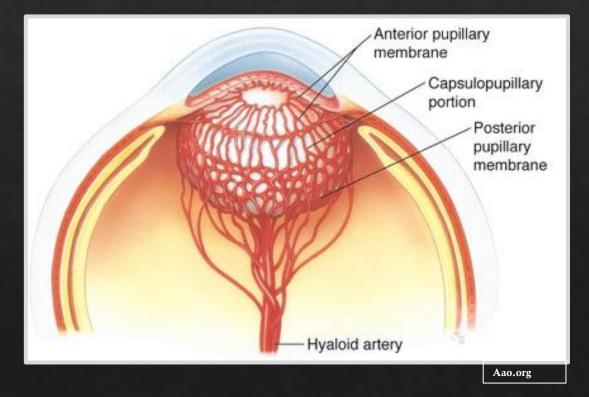
♦ None

Outline

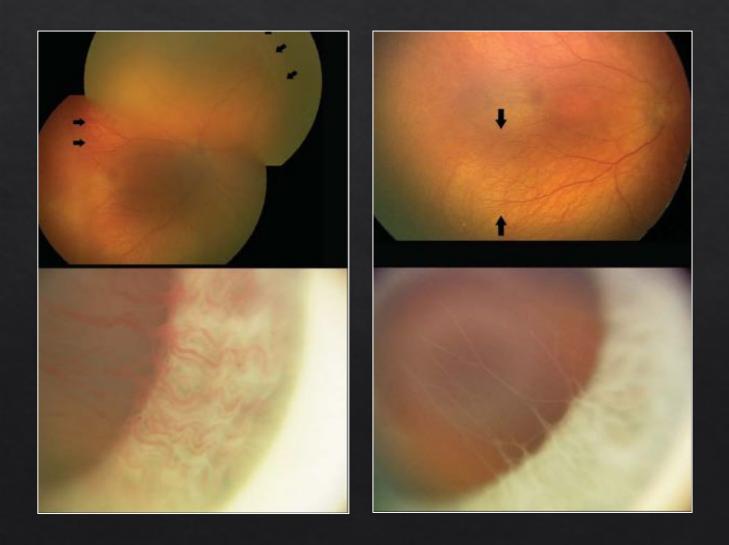
& Background
& Purpose
& Methods
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Background

- Tunica vasculosa lentis (TVL) is a vascular network that aides in development of the lens
- TVL can be identifiable on neonatal screening examination
- ✤ TVL growth and regression is VEGF dependent
- There is limited data correlating TVL with ROP outcomes



Background- TVL Anti-VEGF Response



- 30 week, hazy posterior view
- Anterior segment photo 2 days after intravitreal bevacizumab

Goldman DR, Baumal CR. Dramatic regression of persistent tunica vasculosa lentis associated with retinopathy of prematurity following treatment with intravitreal bevacizumab. *J Pediatr Ophthalmol Strabismus.* 2013;50

Purpose

To assess whether persistent tunica vasculosa lentis (TVL) on neonatal screening examination affects the rate of treatment required in retinopathy of prematurity (ROP).

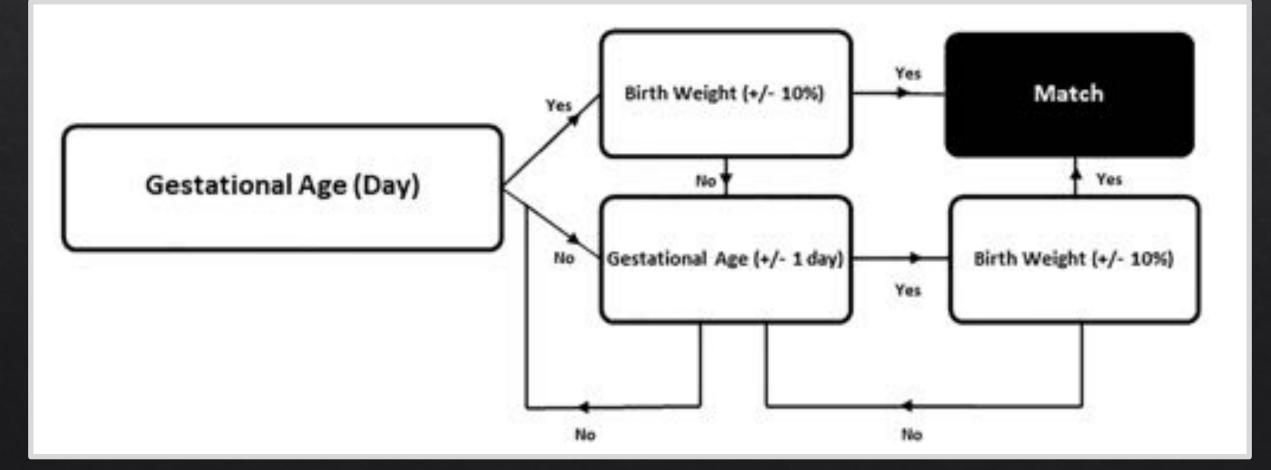
Methods

♦ Single ROP screener 2009-2019

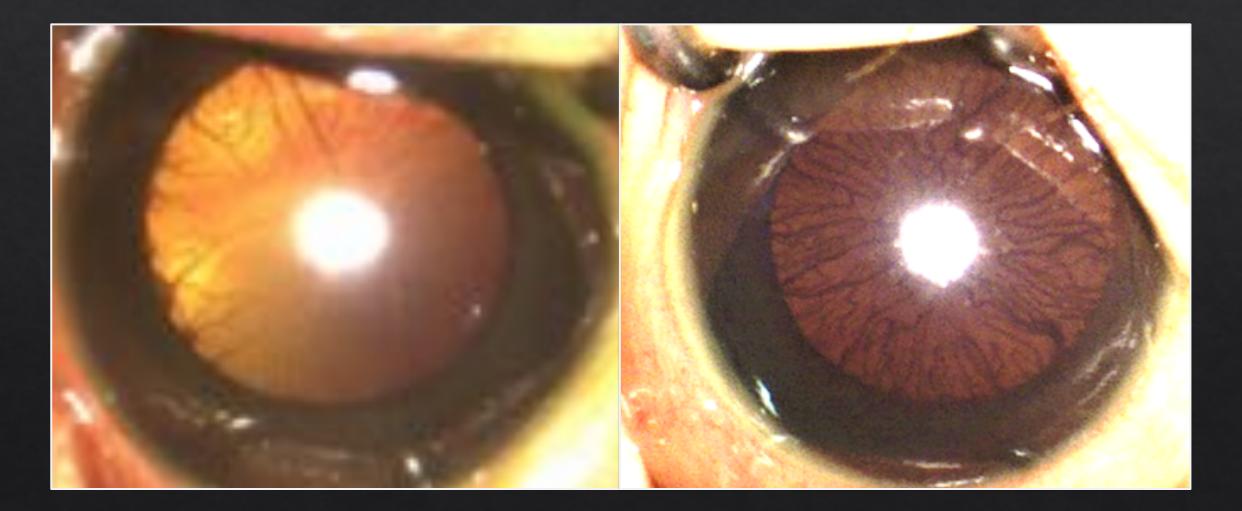
- ♦ Those with TVL matched 1:1 on birth weight and gestational age at birth
- Outcomes included rate of treatment with laser or intravitreal bevacizumab, plus disease, zone 1, and stage 2 or 3 ROP
- Paired t-test, Chi square analysis and McNemar's test were used in the analysis



Matching Algorithm



Representative Photos

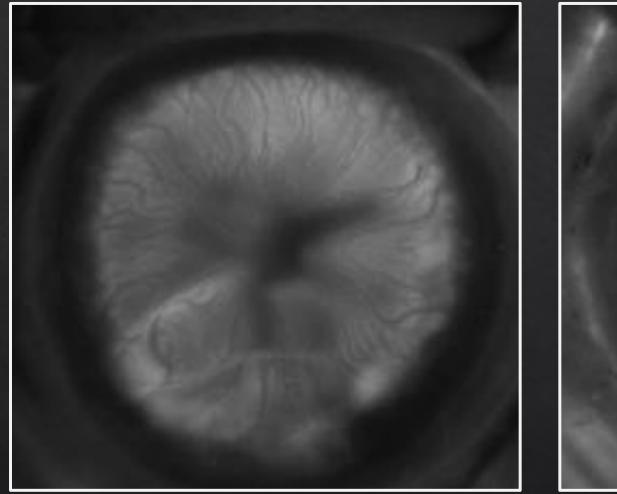


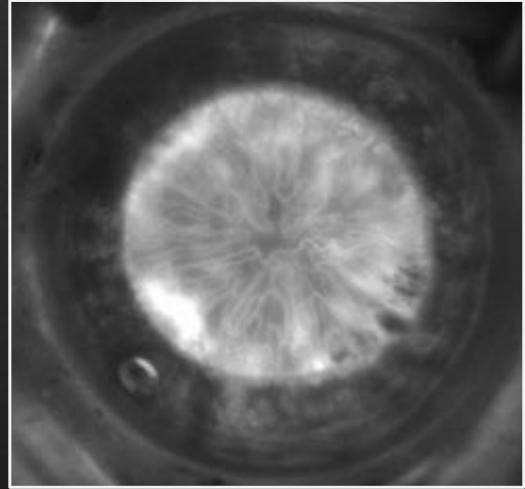
Results

Table 1. Baseline Demographics							
Characteristic	Tunica Cases	Matched Cases	P -Value				
Number of Patients	9	4 94					
Average Birth Weight (Grams) ¹	715.7	0 716.02	0.95				
Average Birth Gestational Age (weeks) ¹	25.7	2 25.71	0.560				
Multiparity ¹	1	5 13	0.83				
TVL at First Visit ¹	76 (80.85%	0					

Results

	Table 2. Outcomes				
Characteristic	Tunica Cases	Matched Cases	P -Value	Odds Ratio	Confidence
Total Treated ²	29 (30.85%)	10(10.64%)	< 0.001	4.80	1.8-16.1
Bevacizumab Intravitreal	26 (27.66%)	6 (6.38%)			
Laser	8 (8.51%)	4 (4.26%)			
Retreatment ³	5 (5.32%)	0	0.302		
Post Conception Age at Treatment ¹	36.39	37.90	0.225]	
Plus Disease ²	25 (26.60%)	16 (17.02%)	0.136		
ROP ²	76 (80.85%)	69 (73.40%)	0.119]	~
Zone 1	15 (15.96%)	2 (2.12%)	0.002	7.50	1.74-67.6
Stage 2 or 3	59 (62.77%)	53 (56.38%)	0.239		





In the TVL group 24% were noted to have a hazy view

Regression Analysis

- The positive correlation between the presence of TVL and rate of treatment in ROP was demonstrated in logistic regression including independent factors:
 - ♦ Birth weight
 - ♦ Gestation age
 - ♦ Plus disease
 - ♦ Multipartiy



Conclusions and Significance

- Largest study to date on the subject of TVL and ROP outcomes
- Those with TVL on ROP screening have a worse prognosis with higher rates of treatment requirement and zone 1 disease when compared to age and birthweight matched controls
- More frequent examinations could be considered in those with persistent TVL on initial screening
- * TVL may play a role in remote ROP screening and could warrant referral to a specialist
- * TVL could be a consideration in AI or mixed ROP prediction algorithms

Thank You

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